



WORKING TO MAKE A DIFFERENCE

Health Care Services

Mailing Address
PO Box 5350 Stn Terminal
Vancouver BC V6B 5L5

Location
6951 Westminster Highway
Richmond BC V7C 1C6

www.worksafebc.com

Telephone 604 232-7787
Toll-free within BC 1 888 967-5377
Fax 604 231-8424

2011 WorkSafeBC Health Authority Fee Schedule

WSBC Fee code	IPA Service code	Description	Effective Date April 1, 2011	Processing Rules
19701	01	Burn/Soft Tissue Injury	\$260.00	
19795	04	CT	\$650.00	May bill if the worker is not a registered inpatient on the date of service
19745	01	Dressing Changes - Outpatient	\$260.00	
19747	01	Cast Clinic	\$260.00	For Cast applications, changes, removal only. Not to be billed with Same Day Services
19787	06	Chemotherapy	\$1,218.00	
19892	01	Chronic Wound care-clinic visit	\$260.00	
19749	n/a	Compression Garments	\$0 to \$500	Actual cost (if > \$500.00 must be pre-authorized and billed manually)
19748	n/a	Custom Braces/Splints/Generation II	\$0 to \$500	Actual cost (if > \$500.00 must be pre-authorized and billed manually)
19957	02	Day Care Surgery	\$1,107.00	
19921	01	Emergency Visit	\$260.00	Cannot be billed with Same Day Services list below
19958	n/a	Fiberglass Cast	\$0 to \$500	Actual cost (if > \$500.00 must be pre-authorized and billed manually)
19786	03	Haemodialysis	\$444.00	
19893		Home IV Therapy Visit	\$45.00	
19792	02	Hyperbaric Oxygen Therapy	\$1,107.00	Cannot be billed with Same Day Services list below
19574	n/a	ICU Per Diem	Varies according to hospital	Use appropriate rate as per Interprovincial Reciprocal Billing Rates
19961	n/a	Inpatient Per Diem	Varies according to hospital	Use appropriate rate as per Interprovincial Reciprocal Billing Rates
19954	01	IV Therapy - 1st, 2nd & 3rd Visits	\$260.00	If 1st IV Therapy Visit includes Emergency, use Emergency Visit fee item
19894	01	IV Therapy Clinic Visit	\$260.00	
19960	n/a	Long Term Ward Rate	\$288.00	
19742	n/a	Medical Imaging - 2nd Opinion	\$200.00	Requires physician referral & WCB authorization

Please include claim or account number in all correspondence

Workers' Compensation Board of British Columbia



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19794	11	MRA (Magnetic Resonance Angiogram)	\$641.00	May bill if the worker is not a registered inpatient on date of service
19793	11	MRI	\$641.00	May bill if the worker is not a registered inpatient on the date of service
19797	01	Multidisciplinary Outpatient Visit / High cost diagnostic imaging procedures ¹	\$260.00	Multidisciplinary Outpatient Visit is not to be billed with Same Day Services except if service provided by another facility
19743	01	Nerve/Epidural Block	\$260.00	Cannot be billed with Same Day Services list below
19796	n/a	Occupational Therapy	\$18.50	
19788	n/a	Orthotics	\$0 to \$500.00	Actual cost (if > \$500.00 must be pre-authorized and billed manually)
19741	n/a	Preferred Accommodation	\$180.00	May bill following WorkSafeBC Officer approval
19789	n/a	Prosthetics	\$0 to \$1500.00	Actual cost (if > \$1,500.00 must be pre-authorized and billed manually)
19791	12	Radiotherapy Services	\$324.00	
19790	05	Outpatient laboratory and general radiography including referred in laboratory specimens and x-ray.	\$130.00	Referred in laboratory specimens refer to specimens brought/sent in for lab test without worker admission
19746	01	Sterile Environment	\$260.00	Cannot be billed with Same Day Services list below
19744	n/a	Take-Away Items from Hospital	\$0 to \$200.00	Also known as supplies - based on actual cost

¹ **High cost diagnostic imaging procedures** include: Nuclear medicine, Fluoroscopy, Ultrasound, Interventional/angiography studies.

Same Day Services: When two or more outpatient activities are provided to the same worker on the same day at the same hospital, regardless of whether the worker was discharged and readmitted to the same hospital on the same day, **only one outpatient activity can be billed by the hospital (i.e. the one activity with the highest rate)**, unless the worker was admitted to the same hospital on an inpatient basis on the same day the outpatient services were provided, in which case **only one outpatient activity can be billed by the hospital (i.e. the one activity with the highest rate) plus the inpatient rate for that day** (and only on the day of admission to an inpatient basis).

Physiotherapy Services: Use the Physiotherapy contract to obtain fees in Schedule B

For Orthopaedic service provided by Salaried Physicians: Use the BCMA Guide to Fees

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